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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
yo pi	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Todd First name	First name
		Middle name	Middle name
		Hardy Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1899	

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Case number (if known) Debtor 1 Todd Hardy

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	815 E. Oakton St. Lot 157	If Debtor 2 lives at a different address:			
		Des Plaines, IL 60018 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Cook County		County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Document Page 3 of 61 Case number (if known) Debtor 1 Todd Hardy Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? □ Yes. District When Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Go to line 12.

No. Go to line 12.

bankruptcy petition.

☐ No.

Yes.

11. Do you rent your

residence?

Case 16-24126 Doc 1 Filed 07/27/16 Entered 07/27/16 15:26:00 Desc Main Document Page 4 of 61 Case number (if known) Debtor 1 Todd Hardy Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety?

Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Todd Hardy

Debtor 1 Todd Hardy

Decument Page 5 of 61

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debto	r 1 Todd Hardy		Document	Case num	ber (if known)
Part 6	Answer These Questi	ions for R	eporting Purposes		
	Vhat kind of debts do you have?	16a.	Are your debts primarily consuindividual primarily for a personal		efined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ess debts? Business debts are debent or through the operation of the bu	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe the	nat are not consumer debts or busin	ess debts
	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.	
а	Oo you estimate that lifter any exempt property is excluded and	■ Yes.		ou estimate that after any exempt prole to distribute to unsecured creditor	operty is excluded and administrative expenses rs?
a	idministrative expenses		■ No		
t c	re paid that funds will be available for listribution to unsecured reditors?		☐ Yes		
У	How many Creditors do	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000
c	owe?	☐ 100-1 ☐ 200-9	99	☐ 10,001-25,000	☐ More than100,000
e	low much do you stimate your assets to e worth?	□ \$100,	550,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
e	low much do you estimate your liabilities o be?	□ \$100,	550,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part 7	Sign Below				
For y	ou	I have ex	camined this petition, and I declare	under penalty of perjury that the info	ormation provided is true and correct.
					le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				ay or agree to pay someone who is cice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I request	relief in accordance with the chapt	er of title 11, United States Code, sp	pecified in this petition.
			cy case can result in fines up to \$2 1.		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Todd H		Signature of Deb	otor 2
		Executed	d on _ July 27, 2016	Executed on	

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Debtor 1 Todd Hardy Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Penelope N. Bach	Date	July 27, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Penelope N. Bach		
Printed name		
Bach Law Offices		
Firm name		
P.O. Box 1285		
Northbrook, IL 60065		
Number, Street, City, State & ZIP Code		
Contact phone (847) 564-0808	Email address	pnbach@bachoffices.com
06284659		
Bar number & State		

	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,082.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,082.00
Pai	rt 2: Summarize Your Liabilities		
		Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	7,116.43
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	49,749.32
	Your total liabilities	\$	56,865.75
Paı	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,674.23
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,774.53
Pai	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	edules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Debtor 1 Todd Hardy

Document Page 9 of 61
Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11: OR . Form 122B Line 11: OR . Form 122C-1 Line 14.	;

\$______5,077.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total c	laim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Document Page 10 of 61 Fill in this information to identify your case and this filing: Debtor 1 **Todd Hardy** Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevy Make: Who has an interest in the property? Check one 3 1 the amount of any secured claims on Schedule D: Trailblazer Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2015 Debtor 2 only Current value of the Current value of the 112540 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$5,244.00 \$5,244.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,244.00 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the

portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

		lawnmower	\$400.00
■ Yes	. Give specific in		\$400.00
□ No	-	d household items you did not already list, including any health aids you did not list	
☐ Yes	. Describe	d household items you did not already list including any health side you did not already list.	
<i>Exam</i> ■ No	nples: Dogs, cats,	birds, horses	
3. Non-f a	arm animals		
■ No □ Yes	. Describe		
2. Jewel Exam		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	, gold, silver
		Wearing Apparel	\$300.00
■ Yes	. Describe		^-
		othes, furs, leather coats, designer wear, shoes, accessories	
11. Clo the			
■ No		s, shotguns, ammunition, and related equipment	
		Golf Clubs	\$100.00
■ Yes	. Describe		
□ No	musical instr	uments	
		ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
	. Describe		
		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi ons, memorabilia, collectibles	in, or baseball card collections;
Callage	ibles of volve		
■ Yes	. Describe	Misc. Electronics	\$600.00
□ No	including cel	I phones, cameras, media players, games	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
7. Electro Examp		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	collections; electronic devices
		Furniture and Appliances	\$1,500.00
■ Yes	. Describe		

Official Form 106A/B

Schedule A/B: Property

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Case number (if known) Debtor 1 **Todd Hardy** Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$5.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **TCF Bank** \$17.00 17.1. Checking **TCF Bank** \$17.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: Yes. Rent **Town and Country lease deposit** \$849.00 Untilities ComEd \$50.00

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No

		Case 16	-24126	Doc 1	Filed 07/27/16 Document	Entered 07/27/16 15:2 Page 13 of 61	26:00 Desc Ma	ain
De	ebtor 1	Todd Hard	у		Document	Case number	(if known)	
	☐ Yes		Issuer name	and description	on.			
		s in an educa c. §§ 530(b)(1)			n a qualified ABLE pro	gram, or under a qualified state tu	uition program.	
	☐ Yes		Institution nai	me and descr	iption. Separately file th	ne records of any interests.11 U.S.C.	. § 521(c):	
	■ No	equitable or to			ty (other than anythin	g listed in line 1), and rights or po	wers exercisable for y	our benefit
	Exampl ■ No		omain names	, websites, pr	s, and other intellectuoceeds from royalties a	al property nd licensing agreements		
	<i>Exampl</i> □ No	-	ermits, exclus	sive licenses,		n holdings, liquor licenses, profession	nal licenses	
	Yes.	Give specific i	nformation ab	out them				
			D	rivers Lice	nse			\$0.00
Mo	oney or p	roperty owed	d to you?				portion Do not d	value of the you own? leduct secured r exemptions.
	■ No	unds owed to Give specific in		out them, incl	uding whether you alre	ady filed the returns and the tax year	rs	
	■ No		•	<i>,,</i> ,	sal support, child suppo	ort, maintenance, divorce settlement	, property settlement	
	Example No		ages, disabilit unpaid loans y	y insurance p	ayments, disability ben someone else	efits, sick pay, vacation pay, worker	's' compensation, Socia	l Security
		s in insuranc les: Health, dis		insurance; he	ealth savings account (HSA); credit, homeowner's, or renter	r's insurance	
	Yes. N	lame the insu		ny of each po pany name:	licy and list its value.	Beneficiary:	Surrene value:	der or refund
				life insurai oyment	nce through			\$0.00
	If you a someon		iary of a living		someone who has die proceeds from a life in	od surance policy, or are currently entitl	led to receive property b	pecause

Official Form 106A/B Schedule A/B: Property page 4

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Case number (if known) Document Debtor 1 **Todd Hardy** 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$938.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 5 5 5 5 6

Par	t 8:	List the Totals of Each Part of this Form			
55.	Part	1: Total real estate, line 2			\$0.00
56.	Part :	2: Total vehicles, line 5	\$5,244.00		
57.	Part :	3: Total personal and household items, line 15	\$2,900.00		
58.	Part -	4: Total financial assets, line 36	\$938.00		
59.	Part :	5: Total business-related property, line 45	\$0.00		
60.	Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part	7: Total other property not listed, line 54	\$0.00		
62.	Total	I personal property. Add lines 56 through 61	\$9,082.00	Copy personal property total	\$9,082.00
63.	Total	I of all property on Schedule A/B. Add line 55 + line 62			\$9,082.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	mation to identify your	case:			
Debtor 1	Todd Hardy				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				☐ Ch	neck if this is an
				an	nended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemption	s are vou claimin	a? Check one onl	v. even if vour st	oouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
2015 Chevy Trailblazer 112540 miles	\$5,244.00	■ \$0.00	735 ILCS 5/12-1001(c)
Line nom <i>Schedule Arb.</i> 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Furniture and Appliances	\$1,500.00	\$1,500.00	735 ILCS 5/12-1001(b)
Line IIIIII Schedule PAB. 9.1		☐ 100% of fair market value, up to any applicable statutory limit	
Misc. Electronics Line from Schedule A/B: 7.1	\$600.00	\$600.00	735 ILCS 5/12-1001(b)
Line from Generalic PAB.		☐ 100% of fair market value, up to any applicable statutory limit	
Golf Clubs Line from Schedule A/B: 9.1	\$100.00	\$100.00	735 ILCS 5/12-1001(b)
Line IIoni Schedule PAB. 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Wearing Apparel Line from Schedule A/B: 11.1	\$300.00	\$300.00	735 ILCS 5/12-1001(a)
Line from Goriedate PVB. 1111		☐ 100% of fair market value, up to any applicable statutory limit	

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Dei	Todu Haruy				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	lawnmower Line from Schedule A/B: 14.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
				100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	735 ILCS 5/12-1001(b)
	Ente from ochledate PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: TCF Bank Line from Schedule A/B: 17.1	\$17.00		\$17.00	735 ILCS 5/12-1001(b)
	Elle Holli Genedale PAB.			100% of fair market value, up to any applicable statutory limit	
	Savings: TCF Bank Line from Schedule A/B: 17.2	\$17.00		\$17.00	735 ILCS 5/12-1001(b)
	Life from Schedule Arb. 11.2			100% of fair market value, up to any applicable statutory limit	
	Rent: Town and Country lease deposit	\$849.00		\$849.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	Untilities: ComEd Line from Schedule A/B: 22.2	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
	Ellio II olii Osii Osii Osii Osii Osii Osii Osii O			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			iled on or after the date of adjustmen	nt)
	No	o your out or and for or		nou on or anor the date of dajustinor	,
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
	□ No	, ,	•	, , , , , , , , , , , , , , , , , , ,	
	☐ Yes				

	Case 16-24126	Doc 1 Filed 07/27/16 Document	Entered Page 17	l 07/27/16 15:: of 61	26:00 Desc I	Main
Fill in thi	s information to identify you	ır case:				
Debtor 1	Todd Hardy					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the	NORTHERN DISTRICT OF ILLI	NOIS			
Case nur (if known)	mber					k if this is an ded filing
Official	Form 106D					
Sche	dule D: Creditors	Who Have Claims S	Secured	by Propert	y	12/15
	copy the Additional Page, fill it	If two married people are filing togethe out, number the entries, and attach it to				
. Do any o	creditors have claims secured by	y your property?				
	o. Check this box and submit t	his form to the court with your other s	schedules. You	u have nothing else t	o report on this form.	
■ Va	es. Fill in all of the information	helow		· ·	·	
	_	below.				
	List All Secured Claims			Column A	Column B	Column C
2. List all for each cl	secured claims. If a creditor has aim. If more than one creditor has	more than one secured claim, list the creds a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2. List all for each cl much as p	secured claims. If a creditor has aim. If more than one creditor has	a particular claim, list the other creditors	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p	secured claims. If a creditor has a aim. If more than one creditor has ossible, list the claims in alphabeti	s a particular claim, list the other creditors cal order according to the creditor's name	in Part 2. As e.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2. List all for each cl much as p 2.1 Gred	secured claims. If a creditor has a aim. If more than one creditor has ossible, list the claims in alphabetiest Lakes Financial	s a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the	in Part 2. As e. he claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred Cred 625 Chi	secured claims. If a creditor has a aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial liter's Name	s a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the country of the claim is: 0 apply. Contingent Unliquidated	in Part 2. As e. he claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred Cred 625 Chi Num	secured claims. If a creditor has aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial litor's Name 5 N. Michigan, #500 icago, IL 60602	s a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the company of the claim is: 0 apply. As of the date you file, the claim is: 0 apply. Contingent Unliquidated Disputed	in Part 2. As e. he claim:	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred Cred 625 Chi Num Who owe	secured claims. If a creditor has aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial litor's Name 5 N. Michigan, #500 licago, IL 60602 ber, Street, City, State & Zip Code es the debt? Check one. 1 only	s a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the country of the claim is: 0 apply. Contingent Unliquidated	in Part 2. As a	Amount of claim Do not deduct the value of collateral. \$7,116.43	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred Cred 625 Chi Num Who owe Debtor	secured claims. If a creditor has aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial litor's Name 5 N. Michigan, #500 licago, IL 60602 ber, Street, City, State & Zip Code es the debt? Check one. 1 only	as a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the continuous c	in Part 2. As s	Amount of claim Do not deduct the value of collateral. \$7,116.43	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred Cred 625 Chi Num Who owe Debtor Debtor Debtor	secured claims. If a creditor has aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial liter's Name 5 N. Michigan, #500 licago, IL 60602 ber, Street, City, State & Zip Code es the debt? Check one. 1 only 2 only	as a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the continuous continuous care according to the creditor's name Describe the property that secures the continuous care according to the claim is: Continuous care according to the claim is: Continuous continuous care according to the claim is: Continuous continuous care according to the claim is: Continuous care according to the claim is: Continuous care according to the claim is: Continuous care according to the creditors accordi	in Part 2. As s	Amount of claim Do not deduct the value of collateral. \$7,116.43	Value of collateral that supports this claim	Unsecured portion If any
2. List all for each cl much as p 2.1 Gred 625 Chi Num Who owe Debtor Debtor Debtor At leas Check	secured claims. If a creditor has aim. If more than one creditor has ossible, list the claims in alphabeti eat Lakes Financial liter's Name 5 N. Michigan, #500 icago, IL 60602 ber, Street, City, State & Zip Code es the debt? Check one. 1 only 2 only 1 and Debtor 2 only	as a particular claim, list the other creditors cal order according to the creditor's name Describe the property that secures the company of the claim is: Capply. As of the date you file, the claim is: Capply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as made car loan) Statutory lien (such as tax lien, meditary).	in Part 2. As s	Amount of claim Do not deduct the value of collateral. \$7,116.43	Value of collateral that supports this claim	Unsecured portion If any

Add the dollar value of your entries in Column A on this page. Write that number here: \$7,116.43

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$7,116.43

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

`	Jaco 10 2-120 E	Document	Page 18 of 61	10.20.00 Descrive	
Fill in this info	ormation to identify your				
Debtor 1	Todd Hardy				
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case number					
(if known)				☐ Check if	this is an
				amended	d filing
	rm 106E/F E/F: Creditors W	/ho Have Unsecured	Claims		12/15
any executory control of the control	ontracts or unexpired leases ecutory Contracts and Unexp ditors Who Have Claims Sec	se Part 1 for creditors with PRIORIT' that could result in a claim. Also li- ired Leases (Official Form 106G). Di ured by Property. If more space is n je. If you have no information to rep	st executory contracts on Schedu to not include any creditors with p needed, copy the Part you need, fi	lle A/B: Property (Official Form partially secured claims that are Il it out, number the entries in t	106A/B) and on e listed in the boxes on the
	ditors have priority unsecure				
No. Go t		d claims against you:			
	0 Paπ 2.				
Yes.	t All of Your NONPRIORIT	V Uneacured Claims			
	ditors have nonpriority unsec				
☐ No. You	have nothing to report in this p	art. Submit this form to the court with y	your other schedules.		
Yes.					
unsecured of	claim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, ist the other creditors in Part 3.If you h	, identify what type of claim it is. Do	not list claims already included in	Part 1. If more
				Total	claim
4.1 Alexi	an Bros Medical Cente	Last 4 digits of acco	ount number		\$51.00
	ority Creditor's Name	When wee the debt			
	Box 22589 9 Network Place	When was the debt	incurred?		
	ago, IL 60673				
Numbe	r Street City State Zlp Code	As of the date you f	file, the claim is: Check all that app	ly	
Who in	curred the debt? Check one.				
■ Deb	otor 1 only	☐ Contingent			
☐ Deb	otor 2 only	☐ Unliquidated			
☐ Deb	otor 1 and Debtor 2 only	☐ Disputed			
☐ At le	east one of the debtors and an	ou	ITY unsecured claim:		
☐ Che	eck if this claim is for a com	munity			
debt	alaim auhiaattfft0		g out of a separation agreement or	divorce that you did not	
	claim subject to offset?	report as priority clair	ms or profit-sharing plans, and other sir	milar dabta	
■ No		•		iiiai dedts	
☐ Yes	•	Other. Specify	Medical Bill		

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Debtor 1 Todd Hardy Case number (if know) \$1,191.98 4.2 Americash Loans, LLC Last 4 digits of account number Nonpriority Creditor's Name 205 Army Trail Rd When was the debt incurred? Glendale Heights, IL 60139 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Pay Day Loan ☐ Yes 4.3 **Animal Medical Center of Itasca** Last 4 digits of account number \$94.00 Nonpriority Creditor's Name 220 Catalpa Street When was the debt incurred? Itasca, IL 60143 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Arlington Ridge Pathology Last 4 digits of account number \$549.00 Nonpriority Creditor's Name 520 E. 22nd Street When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical bill ☐ Yes

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Debtor	1 Todd Hardy	Case number (if know)	
4.5	AT&T	Last 4 digits of account number	\$127.93
	Nonpriority Creditor's Name Legal Services PO Box 968008	When was the debt incurred?	
	Schaumburg, IL 60196 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Beneifical Illinois Inc. et al Nonpriority Creditor's Name	Last 4 digits of account number	\$10,044.00
	C/O CT Corporation 208 S. LaSalle Street Chicago, IL 60604	When was the debt incurred?	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	■ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	
4.7	Board of Managers Linden Woods Cond	Last 4 digits of account number	\$1,734.00
	Nonpriority Creditor's Name 1870 Tall Oaks Sr Aurora, IL 60505	When was the debt incurred?	
-	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Judgment	

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Debioi	1 Odd Hardy	Case number (il know)	
4.8	Calvary SPV I, LLC	Last 4 digits of account number	\$8,406.27
	Nonpriority Creditor's Name 500 Summit Lake Drive, #400 Valhalla, NY 10595	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		■ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	CepAmerica Illinois	Last 4 digits of account number	\$798.77
	Nonpriority Creditor's Name		•
	c/o SCCS	When was the debt incurred?	
	914 14th Stret PO Box 480		
	Modesto, CA 95353		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 0	Comcast	Last 4 digits of account number	\$58.57
<u> </u>	Nonpriority Creditor's Name		
	C/O Credit Management P.O. Box 118288	When was the debt incurred?	
	Carrollton, TX 75011-8288 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the diamnis. Oncor an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ ves	Other Specific	

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Case number (if know) Debtor 1 Todd Hardy 4.1 **Dental Vue** \$215.00 Last 4 digits of account number Nonpriority Creditor's Name 1443 Lee Street When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes 4.1 **DuPage Medical Group** \$97.91 Last 4 digits of account number Nonpriority Creditor's Name 15921 Collections Dr When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes 4.1 **Enhanced Recovery Co L** 1512 \$128.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 57547 When was the debt incurred? **Opened 04/16** Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney At T

☐ Yes

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4.1	Harris	Last 4 digits of account number 2937	\$6,265.00
4	Nonpriority Creditor's Name 111 West Jackson B	When was the debt incurred?	
	Chicago, IL 60604 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Med1 02 Northwest Community Hospital	
4.1	Home Properties LP	Last 4 digits of account number	\$1,688.00
5	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,000.00
	c/o RA C T CORPORATION SYSTEM 208 S. LaSalle Street, Suite 814	When was the debt incurred?	
	Chicago, IL 60604	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	П	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Judgment	
4.1	Home Properties LP	Last 4 digits of account number	\$869.00
	Nonpriority Creditor's Name c/o RA C T CORPORATION	When was the debt incurred?	
	SYSTEM 208 S. LaSalle Street, Suite 814 Chicago, IL 60604		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	

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Case number (if know) Debtor 1 Todd Hardy 4.1 Linden Woods Condo Assoc. \$1,607.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Charles Keough When was the debt incurred? 1250 E DIEHL #405 Naperville, IL 60563 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Judgment 4.1 Medicalrecov 2784 \$613.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2250 E Devon Ave Ste 352 When was the debt incurred? **Opened 04/15** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Med1 02 Northwest ☐ Yes Other. Specify Radiology Associat Nationwide Credit & Co 3348 \$97.00 Last 4 digits of account number Nonpriority Creditor's Name 815 Commerce Dr Ste 270 When was the debt incurred? **Opened 02/16** Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Dupage Medical Group ☐ Yes

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Debto	1 odd Hardy	Case number (if know)	
4.2	Nirali R. Parikh, MD	Last 4 digits of account number	\$640.00
0	Nonpriority Creditor's Name 777 Oakmont Lane, Suite 1600 MO 64000	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify Medical Bill	
4.2			
1	Northwest Commnity Hospital	Last 4 digits of account number	\$3,803.00
	Nonpriority Creditor's Name PO Box 95698	When was the debt incurred?	
	Chicago, IL 60694-5698 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stain is. Onesk an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical bill	
4.2			
2	Northwest Commnity Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$6,264.74
	PO Box 95698	When was the debt incurred?	
	Chicago, IL 60694-5698		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Continued.	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bill	
		- · ·	

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Debtor	1 Todd Hardy	Case number (if know)	
4.2	Northwest Community Healthcare	Last 4 digits of account number	\$2,456.15
	Nonpriority Creditor's Name 28079 Network Place Chicago, IL 60673	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bill	
4.2	Northwest Radiology Assocs.	Last 4 digits of account number	\$613.00
	Nonpriority Creditor's Name 520 E. 22nd ST Lombard, IL 60148	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical Bill	
4.2			
5	Pete Anderson Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	537 Prairie Ave	When was the debt incurred?	
	Des Plaines, IL 60016 Number Street City State Zlp Code	As a false data way file the plains in Oberly all that and the	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	■ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify For Notice Only	

Document Page 27 of 61 Case number (if know) Debtor 1 Todd Hardy 4.2 **Professional Cardiac Services, LLC** \$208.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 520 E. 22nd Street When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bill ☐ Yes 4.2 13N1 Stanisccontr \$798.00 Last 4 digits of account number Nonpriority Creditor's Name 914 14th St When was the debt incurred? Modesto, CA 95353 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 Cep America Illinois ☐ Yes 4.2 State Collection Servi \$208.00 3137 Last 4 digits of account number 8 Nonpriority Creditor's Name Po Box 6250 When was the debt incurred? **Opened 06/15** Madison, WI 53701 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

■ Other. Specify Services

report as priority claims

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

Collection Attorney Professional Cardiac

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Debtor	Todd Hardy	Document	Page 2	8 of 61 Case number (if know)	
4.2	State Collection Servi	Last 4 digits of ac	count number	1358	\$123.00
	Nonpriority Creditor's Name Po Box 6250 Madison, WI 53701	When was the deb	ot incurred?	Opened 05/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you	ı file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIO	RITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations aris report as priority cla	•	aration agreement or divorce that you di	d not
	■ No			ng plans, and other similar debts	
	Yes	Other. Specify	Collection	Attorney Professional Cardia	ac
Part 3	List Others to Be Notified About a De	ebt That You Already I	Listed		
is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ied for any debts in Parts 1 or 2, do not fill out	omeone else, list the orig at you listed in Parts 1 or	ginal creditor i	Parts 1 or 2, then list the collection	agency here. Similarly, if you
	and Address	On which entry in Part 1	· _	_	
EOS (CCA ongwater Drive	Line 4.5 of (Check one):		Part 1: Creditors with Priority Unsecur	
	ell, MA 02061			Part 2: Creditors with Nonpriority Uns	ecured Claims
	•	Last 4 digits of account n	umber		
	and Address	On which entry in Part 1			
ERC PO B	ox 57610	Line 4.5 of (Check one):		Part 1: Creditors with Priority Unsecur	
_	sonville, FL 32241		•	Part 2: Creditors with Nonpriority Unse	ecured Claims
	,	Last 4 digits of account n	umber		
Name a	and Address	On which entry in Part 1	or Part 2 did you	list the original creditor?	
	s & Haris Ltd	Line 4.21 of (Check one	e): [Part 1: Creditors with Priority Unsecur	red Claims
	V. Jackson Blvd Suite 400 ago, IL 60604			Part 2: Creditors with Nonpriority Unse	ecured Claims
Omo	190, 12 00004	Last 4 digits of account n	umber		
Miran	and Address ned Revenue Group, LLC	On which entry in Part 1 of (Check one):		list the original creditor? Part 1: Creditors with Priority Unsecur	red Claims
	Oak Creek Dr Oard, IL 60148			Part 2: Creditors with Nonpriority Unse	ecured Claims
LOIIIL	Jaru, IL 00140	Last 4 digits of account n	umber		
Namo	and Address	On which entry in Part 1	or Part 2 did voi	list the original creditor?	
	ned Revenue Group, LLC	Line 4.21 of (Check one		Part 1: Creditors with Priority Unsecur	red Claims
	Oak Creek Dr			Part 2: Creditors with Nonpriority Unse	
Lomb	pard, IL 60148	Last 4 digits of account n			
	and Address ned Revenue Group, LLC	On which entry in Part 1 of Line 4.22 of (Check one		list the original creditor? Part 1: Creditors with Priority Unsecur	red Claims
	Pak Creek Dr	Line Time Of Check Offe	_	Part 2: Creditors with Nonpriority Unsecut	
Lomb	pard, IL 60148			- Fait 2. Creditors with Nonphonty Uns	SUUISU CIAIIIIS
		Last 4 digits of account n	umber		
	and Address	On which entry in Part 1			
Natio	nwide Credit & Collections	Line 4.12 of (Check one	e):	Part 1: Creditors with Priority Unsecur	red Claims

Suite 100

815 Commerce Dr

Oak Brook, IL 60523

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

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Debtor 1 Todd Hardy

Document

Name and Address Shindler & Joyce 1990 E. Alginquin Rd. Suite 180 Schaumburg, IL 60173

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 49,749.32
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 49,749.32

Fill in this infor	mation to identify your	case:		
Debtor 1	Todd Hardy			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Town and Country 815 E. Oakton Des Plaines, IL 60018 residential lease 849.00 per month

		Docume	nt Page 31 o	of 61	
Fill in this	information to identify your	case:			
Debtor 1	Todd Hardy				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
	G,				
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	ber				
(if known)				☐ Check if this is an	
				amended filing	
Official	I Form 106H				
	ule H: Your Cod	lahtars		12/1	1 5
Scried	ule II. Toul Cou	ienioi 2		12/1	
eople are ill it out, ar our name	filing together, both are equ	ually responsible for suppe boxes on the left. Attach). Answer every question.	lying correct informati the Additional Page to	is complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Part to this page. On the top of any Additional Pages, write as a codebtor.	age,
	,	you are ming a joint oace, t	io not not ouner opouco	do d codobio.	
■ No					
☐ Yes	;				
	nin the last 8 years, have yo a, California, Idaho, Louisiana			y? (Community property states and territories include ington, and Wisconsin.)	
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make s	r if your spouse is filing with you. List the person sh sure you have listed the creditor on Schedule D (Off 16G). Use Schedule D, Schedule E/F, or Schedule G	ficial
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	ebt
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
7	Number Street			_	

State

City

ZIP Code

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	in this information to identify your o									
Del	otor 1 Todd Hardy	1			_					
	otor 2									
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF ILLINOIS		_					
	se number nown)		-				k if this is n amende			
						□ A	supplem	ent showin	g postpetition ollowing date:	
0	fficial Form 106I					M	IM / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/15
atta	use. If you are separated and you ch a separate sheet to this form. t1: Describe Employment Fill in your employment									
١.	information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				☐ Empl	oyed mployed		
	employers.	Occupation	Diesel Mechanic							
	Include part-time, seasonal, or self-employed work.	Employer's name	Transervice Lo	-						
	Occupation may include student or homemaker, if it applies.	Employer's address	5 Dakota Dr New Hyde Park	, NY 11	042					
		How long employed t	here? 8 mon	ths			_			
Par	Give Details About Mo	nthly Income								
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any	line, write	\$0 in the	space. Inc	clude your no	n-filing
	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
						For Dek	otor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5	,163.60	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	5,16	63.60	\$	N/A	

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Deb	tor 1	Todd Hardy	_	(Case r	number (if kno	wn)				
					For	Debtor 1			Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.		\$	5,163.	60	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	1,405.	26	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50) .	\$	0.	00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50	ı.	\$	0.	00	\$		N/A	_
	5e.	Insurance	5e		\$		00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$		00	\$		N/A	_
	5g.	Union dues	5g		\$	84.		. \$		N/A	_
	5h.	Other deductions. Specify:	_ on	1.+	\$		00	+ \$		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,489.		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,674.	23	\$		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a .	\$	0.	00	\$		N/A	
	8b.	Interest and dividends	8b		\$		00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$		00	\$		N/A	
	8d.	Unemployment compensation	80		\$		00	\$		N/A	_
	8e.	Social Security	8e	€.	\$	0.	00	\$		N/A	<u>-</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		00	\$		N/A	_
	8g.	Pension or retirement income	89		\$		00	\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	0.	00	+ \$		N/A	<u>. </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	0.	00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	•	3,674.23	+ \$		N/A	= \$	3,674.23
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		5,074.25	· • -		IVA	- [•] -	3,074.23
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•			chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies							12.	\$	3,674.23
13.	Do	you expect an increase or decrease within the year after you file this form	?						·	Combi month	ned ly income
		No.									
		Voc Evoloin:									

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	41			·		1		
Fill in	this informat	ion to identify yo	our case:					
Debto	r 1	Todd Hardy					k if this is:	
Debto	ır 2					_	An amended filing A supplement shov	ving postpetition chapter
(Spou	se, if filing)						13 expenses as of	the following date:
United	d States Bankri	uptcy Court for the:	NORTH	ERN DISTRICT OF ILLING	OIS	1	MM / DD / YYYY	
Case (If kno	number own)							
Off	icial Fo	rm 106J				•		
Sc	hedule	J: Your I	Exper	nses				12/15
Be as	s complete a	ind accurate as	possible. eded, atta	. If two married people ar				
Part 1		ibe Your House	hold					
	Is this a join							
	■ No. Go to □ Yes Does		n a separ	ate household?				
	_ 100. 200 .		a copa.					
			t file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debte	or 2.	
2.	Do you have	dependents?	■ No					
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
•	dependents r	names.						☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
		enses include people other the		No				
		r people other ti I your dependel		Yes				
Dort 1	De Catima	ota Varir Onwaii	na Manthi	ly Evnences				
expe	nate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the v		assistance and		government assistance it cluded it on <i>Schedule I:</i> Y			Your exp	enses
(01110	Jiai i Oilli 10	o <i>,</i>						
		r home owners d any rent for the		ses for your residence. In	nclude first mortgag	e 4. \$		849.00
I	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		0.00
	•	ty, homeowner's	-			4b. \$		20.00
				upkeep expenses		4c. \$		50.00
		owner's associat		dominium dues our residence , such as ho	me equity loans	4d. \$ 5. \$		0.00

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natural gas arbage collection phone, Internet, satellite, and cable services sing supplies en's education costs d dry cleaning ets and services expenses de gas, maintenance, bus or train fare. ments. , recreation, newspapers, magazines, and books ons and religious donations de deducted from your pay or included in lines 4 or 20. et	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b. 17c. 17d.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	220.00 0.00 242.00 0.00 600.00 50.00 30.00 240.00 50.00 0.00 0.00 0.00 105.00 20.00 341.86 0.00 0.00
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n, recreation, newspapers, magazines, and books ons and religious donations ace deducted from your pay or included in lines 4 or 20. be ce a. Specify: renters insurance taxes deducted from your pay or included in lines 4 or 20. be compared to the co	13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 105.00 20.00 0.00 341.86 0.00 0.00
cons and religious donations ce deducted from your pay or included in lines 4 or 20. ce ce ce c. Specify: renters insurance taxes deducted from your pay or included in lines 4 or 20. coayments: cr Vehicle 1 cr Vehicle 2 coaymony, maintenance, and support that you did not report acts and on line 5, Schedule I, Your Income (Official Form 106I).	14. 15a. 15b. 15c. 15d. 16. 17a. 17b. 17c. 17d.	\$	0.00 0.00 105.00 20.00 0.00 341.86 0.00 0.00
ce deducted from your pay or included in lines 4 or 20. e ce c. Specify: renters insurance taxes deducted from your pay or included in lines 4 or 20. coayments: cor Vehicle 1 cor Vehicle 2 compony, maintenance, and support that you did not report acrease on line 5, Schedule I, Your Income (Official Form 106I).	15a. 15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 105.00 20.00 0.00 341.86 0.00 0.00
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renters insurance taxes deducted from your pay or included in lines 4 or 20. cayments: or Vehicle 1 or Vehicle 2 caymony, maintenance, and support that you did not report acoay on line 5, Schedule I, Your Income (Official Form 106I).	15b. 15c. 15d. 16. 17a. 17b. 17c.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 105.00 20.00 0.00 341.86 0.00 0.00
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n. Specify: renters insurance taxes deducted from your pay or included in lines 4 or 20. payments: pay Vehicle 1 pay Vehicle 2 mony, maintenance, and support that you did not report as pay on line 5, Schedule I, Your Income (Official Form 106I).	15d. 16. 17a. 17b. 17c. 17d.	\$	20.00 0.00 341.86 0.00 0.00
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or Vehicle 1 or Vehicle 2 mony, maintenance, and support that you did not report a pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	17b. 17c. 17d.	\$	0.00 0.00
or Vehicle 2 mony, maintenance, and support that you did not report as you on line 5, Schedule I, Your Income (Official Form 106I).	17b. 17c. 17d.	\$	0.00 0.00
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pay on line 5, Schedule I, Your Income (Official Form 106I).	17d.		
pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	
pay on line 5, Schedule I, Your Income (Official Form 106I).		·	0.00
and the decision and address to the decision of the decision o		\$	0.00
make to support others who do not live with you.		\$	0.00
	19.		
xpenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	ur Income.	
ther property	20a.	\$	0.00
es .	20b.	\$	0.00
owner's, or renter's insurance	20c.	\$	0.00
pair, and upkeep expenses	20d.	\$	0.00
ssociation or condominium dues	20e.	\$	0.00
		·	606.67
· · · · · · · · · · · · · · · · · · ·		• *	000.07
•		\$	3,774.53
_			3,114.33
		·	
, , ,		\$	3,774.53
nly net income.			
		· -	3,674.23
hly expenses from line 22c above.	23b.	-\$	3,774.53
onthly expenses from your monthly income.	23c.	\$	-100.30
	22b. The result is your monthly expenses. Ally net income. But combined monthly income) from Schedule I. The holy expenses from line 22c above. The property of the proper	ally expenses gh 21. In the person of Debtor 2), if any, from Official Form 106J-2 22b. The result is your monthly expenses. In the person of Debtor 2), if any, from Official Form 106J-2 22b. The result is your monthly expenses. In the person of the	sylp 21. Inthly expenses for Debtor 2), if any, from Official Form 106J-2 22b. The result is your monthly expenses. Interpretation of the income of the i

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Elli to this to for					
FIII IN this infor	rmation to identify your	case:			
Debtor 1	Todd Hardy	ACT III AL			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an
					amended filing
· You must file th obtaining mone	is form whenever you fi	n connection with a bank	or amended schedules	rect information. . Making a false statement, co in fines up to \$250,000, or imp	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attori	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				etition Preparer's Notice, nature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sumi	mary and schedules file	d with this declaration and	
X /s/ Too	dd Hardv		X		
Todd			Signature of	Debtor 2	
Signatu	ure of Debtor 1				
Date	July 27, 2016		Date		

		ation to identify you	r case:					
Debtor	1	Todd Hardy First Name	Middle Name		Last Name			
Debtor	_							
(Spouse	if, filing)	First Name	Middle Name		Last Name			
United	States Ban	kruptcy Court for the:	NORTHERN DISTRIC	T OF ILI	LINOIS			
Case n	umber							
(if known)							heck if this is an
							ar	mended filing
O ((;		4.0-						
	ial For							
State	ement	of Financial	Affairs for Indiv	′idua	ils Filing for B	ankruptcy		4/1
			ible. If two married peopl					
). Answer every que	attach a separate sheet stion.	to this i	form. On the top of any	additional pages, wr	ite you	r name and case
Part 1:	Give De	etails About Your Ma	arital Status and Where Y	ou Live	ed Before			
		accurant marital atatu						
1. WI	iat is your	current marital statu	15 ?					
	Married							
•	Not marr	ied						
2. Du	ring the la	st 3 years, have you	lived anywhere other that	ın wher	e you live now?			
	No							
	Yes. List	all of the places you	ived in the last 3 years. Do	not incl	lude where you live now			
D	ebtor 1 Pri	or Address:	Dates Debtor	· 1	Debtor 2 Prior Ad	dress:		Dates Debtor 2
	00.14711	0	lived there					lived there
	20 Willow asca, IL 6		From-To: December 2	2011 -	☐ Same as Debtor 1			☐ Same as Debtor 1 From-To:
	•		May 2016					
1	713 Bonita	a Ave	From-To:		☐ Same as Debtor 1			☐ Same as Debtor 1
-		spect, IL 60056	Nov. 2013 -	Dec.	☐ Same as Debior 1			From-To:
			2015					
			ver live with a spouse or Ilifornia, Idaho, Louisiana, I					
_				,	,	3.1 J		,
	No Yee Mel	ra aura vou fill aut Ca	hadula II. Vaur Cadabtara	(Official	Form 10611)			
	T es. Iviar	te sure you iii out 30	hedule H: Your Codebtors	Oniciai	roilli 106H).			
Part 2	Explain	the Sources of You	r Income					
4. Die	d vou have	any income from er	nployment or from opera	ting a h	ousiness during this ve	ear or the two previous	s calen	dar vears?
Fill	in the total	amount of income yo	u received from all jobs an	d all bus	sinesses, including part-	time activities.	5 Gaicii	dai years.
If y	ou are filino	g a joint case and you	have income that you rece	ive toge	ether, list it only once un	der Debtor 1.		
	No							
	Yes. Fill i	in the details.						
			Debtor 1			Debtor 2		
			Sources of income		ross income	Sources of income		Gross income
			Check all that apply.	,	efore deductions and (clusions)	Check all that apply.		(before deductions and exclusions)
					•			,

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Page 38 of 61 Case number (if known) Debtor 1 Todd Hardy

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		/ 1 of curre iled for bar	nt year until ikruptcy:	■ Wages, commissions, bonuses, tips	\$34,637.19	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	ast calen uary 1 to	dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips	\$52,609.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$43,969.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business		Operating a	business	
١	winnings. List each s No	lf you are fili	ng a joint cas	pensions; rental income; inter e and you have income that y me from each source separat	ou received together, list it	only once under De	ebtor 1.	a gambiing and lottery
				Debtor 1	Onesa in same from	Debtor 2		0
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part	3: List	Certain Pa	yments You	Made Before You Filed for I	Bankruptcy			
	Are eithe i □ No.	Neither Deindividual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	ach creditor to whom you paid editor. Do not include paymen payments to an attorney for th	d purpose." d you pay any creditor a tot d a total of \$6,425* or more ts for domestic support obla is bankruptcy case.	tal of \$6,425* or more pay igations, such as ch	re? ments and thild support an	ne total amount you nd alimony. Also, do
	_			on 4/01/19 and every 3 years		n or after the date o	f adjustment.	
l	■ Yes.			r both have primarily consu re you filed for bankruptcy, did		tal of \$600 or more?		
		No.	Go to line 7					
		□ Yes	include pay	ach creditor to whom you pai ments for domestic support of this bankruptcy case.				
	Creditor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

Case number (if known) Debtor 1 Todd Hardy Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. □ No Yes. List all payments to an insider. **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment paid still owe **Carl Anderson** June 2016 \$400.00 \$0.00 Madison, WI Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider Insider's Name and Address Total amount Amount vou Reason for this payment Dates of payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. □ No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Calvary SPV I, LLC v. Todd Hardy Collections **Kane County** Pending 16 SC 197 □ On appeal Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

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consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

□ No

Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You

Bach Law Offices P.O. Box 1285 Northbrook, IL 60065 pnbach@bachoffices.com Description and value of any property transferred

pperty Date payment or transfer was made

re payment Amount of payment de

Attorney Fees \$500.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No

☐ Yes. Fill in the details

Person Who Was Paid Address Description and value of any property transferred

Date payment or transfer was made

Amount of payment Case 16-24126 Doc 1 Filed 07/27/16 Entered 07/27/16 15:26:00 Desc Main Page 41 of 61 Case number (if known) Document

Debtor 1 Todd Hardy

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your prope include gifts and transfers that you have already listed on this statement. No						
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and va property transferre		payme	ibe any property or ents received or debts n exchange	Date transfer was made
	Person's relationship to you					
	Great Lakes Financial 625 N. Michigan, #500 Chicago, IL 60602	1997 Jeep Jimm	у	down	payment on car	
	none					
19.	 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 					of which you are a
	Name of trust	Description and va	lue of the prop	erty trans	ferred	Date Transfer was made
					made	
Par	List of Certain Financial Accounts, Instru	ments, Safe Deposit	Boxes, and Sto	rage Unit	s	
20.	sold, moved, or transferred?	were any financial accounts or instruments held in your name, or for your benefit, closed, other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage tions, and other financial institutions.				
	Yes. Fill in the details.					
	Name of Financial Institution and La	st 4 digits of Type of account or instrument		nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	r before you filed for I	bankruptcy, any	y safe dep	oosit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution	Who else had acce	ess to it?	Describe	the contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Str State and ZIP Code)		2000.1100		have it?
22.	Have you stored property in a storage unit or p	lace other than your I	nome within 1 y	ear befor	e you filed for bankrupto	y?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, Str State and ZIP Code)		Describe t	the contents	Do you still have it?

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Debtor 1 Todd Hardy

Pai	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	rty you borrowed from, are storing fo	r, or hold in trust				
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pai	t 10: Give Details About Environmental Information	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground	- ·					
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	Have you notified any governmental unit of any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a t	trade, profession, or other activity,	either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)					
	☐ A partner in a partnership	•	•					
		tive of a corporation						
	☐ An owner of at least 5% of the voting or	-						

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No. None of the above applies. Go to Part 12.								
	Yes. Check all that apply above and fill in the details below for each business.							
	Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Employer Identification number Do not include Social Security number or I' Name of accountant or bookkeeper Dates business existed							
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued						

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Part 1	2: Sign Below	
are tru with a	e and correct. I unde	this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers restand that making a false statement, concealing property, or obtaining money or property by fraud in connection result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 9, and 3571.
/s/ To	odd Hardy	
Todd	Hardy	Signature of Debtor 2
Signa	ture of Debtor 1	
Date	July 27, 2016	Date
Did yo	u attach additional pa	ages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did yo	u pay or agree to pay	someone who is not an attorney to help you fill out bankruptcy forms?
■ No		
	Name of Person	Attach the Rankruntcy Petition Preparer's Notice Declaration and Signature (Official Form 119)

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Fill in this informa	ation to identify your	case:					
Debtor 1							
Debior	Todd Hardy First Name	Middle Name		Last Name			
Debtor 2							
(Spouse if, filing)	First Name	Middle Name		Last Name			
United States Bank	cruptcy Court for the:	NORTHERN DIS	TRICT OF ILLI	NOIS			
Case number							
(if known)		 -					Check if this is an
							amended filing
If you are an indivi creditors have of you have leased You must file this whicheve on the following and Be as complete an	dual filing under char claims secured by you do personal property a form with the court we er is earlier, unless the rm	oter 7, you must fil ur property, or nd the lease has n ithin 30 days after e court extends th in a joint case, bo	Il out this form ot expired. you file your e time for cau oth are equally	n if: bankruptcy petition o se. You must also se responsible for supp	or by the date se and copies to the	t for the me creditors	s and lessors you list
): Creditors W	ho Have Claims Secu	red by Property	(Official F	Form 106D), fill in the
Identify the cred	itor and the property t	nat is collateral	What do yo secures a o	ou intend to do with the lebt?	ne property that		you claim the property exempt on Schedule C?
Creditor's Gre	eat Lakes Financia			er the property.			No
name.			_	he property and redeer he property and enter in		■ Y	es /es
Description of	2015 Chevy Trailbl	azer 112540		ie property and enter it nation Agreement.	iio a		
property	miles		☐ Retain th	e property and [explain	n]:		
securing debt:						_	
For any unexpired in the information You may assume a	below. Do not list rea an unexpired persona	ase that you listed I estate leases. Un I property lease if	expired lease	s are leases that are	still in effect; the	e lease pe 2).	(Official Form 106G), fill riod has not yet ended.
Describe your und	expired personal pro	berty leases				will the l	ease be assumed?
Lessor's name:	Town and Cou	intry				□ No	
						Yes	
Description of lease Property:	ed residential lea	se 849.00 per mo	onth				
Part 3: Sign Be	low						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Deb	tor 1 Todd Hardy	Case number (if known)
	er penalty of perjury, I declare that I have indicat erty that is subject to an unexpired lease.	ted my intention about any property of my estate that secures a debt and any personal
Х	/s/ Todd Hardy	Χ
^	Todd Hardy	Signature of Debtor 2
	Signature of Debtor 1	
	Date July 27, 2016	Date

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-24126 Doc 1 Filed 07/27/16 Entered 07/27/16 15:26:00 Desc Main Document Page 51 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Todd Hardy		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filbe rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	500.00	
	Prior to the filing of this statement I have received	[\$	500.00	
	Balance Due		\$	0.00	
2.	\$335.00_ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed com	pensation with any other person	unless they are mem	pers and associates of my law firm	
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of the agreement.				
6.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 				
7.	By agreement with the debtor(s), the above-disclosed f	ee does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in	
,	July 27, 2016	/s/ Penelope N. Ba	ach		
_	Date	Penelope N. Bach	06284659		
		Signature of Attorne Bach Law Offices			
		P.O. Box 1285			
		Northbrook, IL 60			
		(847) 564-0808 F pnbach@bachoff		•	
		Name of law firm			

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Bach Law Offices

Paul M. Bach, JD/CPA Penelope N. Bach, JD

PO Box 1285, Northbrook, Illinois 60065 555 Skokie Blvd, Suite 500, Northbrook, IL 60062 Phone: (847) 564-0808 Facsimile: 847-564-0985

CONTRACT FOR CHAPTER 7 BANKRUPTCY SERVICES

This Agreement is executed this the 22^{nd} day of July, 2016, by and between Bach Law Offices. (the Attorney) and Todd E. Hardy (the Debtor(s), whether one or more parties). The parties agree as follows:

1. Type of Bankruptcy.

Debtor retains attorney to file a Chapter 7 bankruptcy case. If the Debtor determines at a later date that the Debtor desires to file a Chapter 13 bankruptcy case, the parties shall execute a new fee contract setting forth the terms of such representation.

2. Base Attorney Fees.

The base attorney fee for filing the Chapter 7 bankruptcy case is \$\$500.00. (Filing Fee, Courses and Credit Report fees are not included in the base fee)

The base fee of \$\$500.00 is based on the following assumptions:

- (a) The Debtor has provided the Attorney with complete and accurate information.
- (b) The Debtor's circumstances, particularly the Debtor's Current Monthly Income as defined by the Bankruptcy Code, does not substantially change prior to the actual filing of the Chapter 7 Bankruptcy case.
- (c) The Debtor must pay the fee in full upon the execution of this Agreement.

If any of these assumptions prove to be inaccurate, and as a result the amount of legal services provided by the Attorney is increased, then the base attorney fee shall be increased accordingly and to compensate the Attorney for the additional time and services in providing the legal services. At such time, the parties must execute a supplement to this Agreement. If the Debtor refuses to sign such a supplement, then the Attorney-Debtor relationship shall be terminated and no Chapter 7 bankruptcy Case will be filed for Debtor by the Attorney.

3. Refund of Percentage of Base Fee.

In the event the legal services provided for herein are terminated by either party prior to the filing of a Chapter 7 bankruptcy case, then the Debtor may be entitled to a refund of some of the base fee. The refund shall be determined by the number of hours devoted by Attorney to the case prior to the time of termination computed at the rate of \$420.00 per hour; by the time devoted to the case by the Legal Assistants of Attorney computed at the rate of \$125.00 per hour; by adding all expenses incurred (such as copies, postage, securing records and documents, tax transcripts, credit reports, etc); and then by deducting the total amount of all charges from the Base Fee. If the event the total of all such fees and charges exceed the Base Fee, the Debtor's liability shall be limited to the amount of the Base Fee.

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4. Debtor's Obligations to Pay Designated Costs.

The Debtor shall be obligated to pay the following costs related to the filing of a Chapter 7 bankruptcy case. The costs are as follows:

- (a) The fee of \$335.00 charged by the Bankruptcy Court to file a Chapter 7 bankruptcy case.
- (b) The cost of pre-filing consumer credit counseling, which is a prerequisite to filing for bankruptcy relief, which is approximately \$25.00 for an individual and no more than \$50.00 for a husband and wife.
- (c) The cost of a post-filing instructional course concerning personal financial management, which is a prerequisite to obtaining the Discharge of debts in a Chapter 7 case which is approximately \$25.00 for an individual and no more than \$50.00 for a husband and wife.
- (d) The cost of obtaining any consumer credit reports which is approximately \$23.00.
- (e) The cost of obtaining tax returns or tax transcripts directly from the taxing authorities or from any third-party provider.
- (f) The cost of obtaining copies of judgments, deeds, deeds of trust, title certificates, court papers, county tax records, and other similar documents.
- (g) The cost of securing any prior court records from the PACER system for federal cases.
- (h) The cost of securing any other records or statements not otherwise produced by or available to the Debtor.

5. Services provided Under the Attorney's Base Fee.

The services of the attorney included in the base fee are those normally contemplated for a Chapter 7 case. They include the services listed below:

- (a) All services reasonably necessary to fully inform the Debtor of the Debtor's rights and responsibilities under the Bankruptcy Laws.
- (b) All services reasonably necessary to enable the Debtor to make an informed decision about the filing of a Chapter 7 bankruptcy case.
- (c) Advising the Debtor of all available exemptions under any applicable law and assisting the Debtor in claiming the exemptions that best serve the Debtor's needs and desires.
- (d) Assisting the Debtor in complying with all of the requirements imposed by the Bankruptcy Laws, the Bankruptcy Rules, or any Local Bankruptcy Rules.
- (e) Preparation and electronic filing of petition, schedules, supplemental local forms, Chapter 13 Plan and mailing matrix.
- (f) Drafting and mailing notice to creditors advising of filing of case.
- (g) Drafting and mailing to you a letter regarding your attendance at the Section 341 meeting of creditors and your other responsibilities.
- (h) Preparation for and attendance at Section 341 meeting.
- (i) Filing of any motions to avoid non-purchase money liens on exempt household goods and judgment liens that impair exempt property.
- (j) Assisting the Debtor in carrying out the Debtor's Statement of Intentions, provided that the Debtor pays the Non-Base Fee for any redemptions.
- (k) Assisting the Debtor in complying with all proper and timely requests for information and/or documents by the Bankruptcy Trustee, the Bankruptcy Administrator, the Court, or other parties involved in the case.
- (I) Communicating as necessary with the creditors and other parties involved in the case (including their attorneys) to facilitate the administration of the case and the application of the Automatic Stay.

6. Additional or Non-Base Legal Services.

In some Chapter 7 cases, the legal services which are beyond those contemplated in the base fee must nonetheless be provided by the Attorney. These legal services are listed below:

- (a) Representing the Debtor in any dischargeability proceeding, including student loan discharge proceedings.
- (b) Representing the Debtor in any contested motion to avoid any type of a lien or judgment.
- (c) Representing the Debtor in a motion to continue the Automatic Stay.
- (d) Representing the Debtor in any contested matters or adversary proceedings related to the enforcement of the Automatic Stay by a creditor.
- (e) Representing the Debtor in any action to enforce the Discharge injunction or enforce the Automatic Stay.
- (f) Representing the Debtor in any motions related to the enforcement of Sections 707(a) or 707(b) of the Bankruptcy Code, except as provided in the Special Circumstance Addendum.
- (g) Representation the Debtor in any contested motions for relief from the Automatic Stay.
- (h) Representing the Debtor in any motions to redeem exempt personal property.
- (i) Representing the Debtor in any contested matter regarding the Debtor's claim of exempt property.
- (j) Filing any amendments to the Schedules, unless the amendment arises out of a mistake by the Attorney.
- (k) Filing a motion to continue the 341 meeting of creditors at the request of the Debtor.
- (I) Filing of motions to abandon property.
- (m) Filing of motion to reopen case.
- (n) Filing of Form B23 post closing without a discharge.
- (o) Representing the Debtor in any other matters not specifically designated as a Base Fee Service in this Agreement.

7. Compensation for Non-Base Legal Services.

For such non-base services, you may be charged without any further notice and in the discretion of the Court non-base fees for the following services and in the amounts noted:

(a)	Amendments to Schedules & Court Fee	\$126.00
(b)	Motion to continue the 341 meeting	\$100.00
(c)	Defending a motion for relief from stay	\$450.00
(d)	Motion for Redemption	\$350.00
(e)	Motion to continue the Automatic Stay	\$450.00
(f)	Motion to Avoid a Lien or Judgment	\$350.00
(g)	Motion to Reopen and file B23	\$500.00

- (h) With respect to all other mattes, other than the contingent fee cases described below, the Attorney will keep time and expense records for any non-base service and apply to the Court for the approval of the fee plus all expenses incurred. The current hourly fee for your Attorney is \$325.00 and the current hourly fee for his Legal Assistant is \$125.00.
- (i) The attorney will be entitled to a contingency fee equal to 50% of any actual recovery from any party for a violation of the automatic stay, the discharge injunction, or for breach of any state or federal consumer protection statutes.

8. Expenses.

The Attorney shall be entitled to apply to the Court for approval of any expenses related to your case for base fee or non-base fee services. Such expenses include but are not limited to court fees, telephone fees, fax fees, copy fees, postage fees, PACER fees, electronic or other research fees. In the Court's discretion, the Attorney may request without any notice or documentation a blanket expense of \$1.00 for each item noticed to creditors as an expense for postage, copying and envelopes.

9. Payment of Base and Non-Base Fees.

- (a) The Base Fee shall be paid in full prior to the time the Attorney begins any actual work on the Chapter 7 Petition and Schedules.
- (b) All fixed Non-Base fees must be paid in Advance of the Service by the Debtor.
- (c) Fees for services based on time and expenses shall be paid within 30 days of the Debtor's receipt of the bill for such services; provided, however, that the Attorney may require the payment of a retainer fee for non-base services that are expected to require more than 2 hours of the Attorney's time.
- (d) The Debtor understands that if the Debtor does not pay the non-base fees as provided in this Agreement then the Attorney has no obligation to provide the non-base services and has the right to file a motion to withdraw as the attorney for the debtor in the Chapter 7 case, the contested case, or the adversary proceeding.

10. Debtor's Obligations.

The Debtor's obligations are as follows:

- (a) To promptly pay all Base and Non-Base Legal fees and charges.
- (b) To provide the Attorney with all requested documents, bills statements, payment advices, bank records, tax returns, tax bills, appraisals, retirement and savings account, and income information and to sign any and all necessary forms to allow the Attorney to secure such documentation.
- (c) To provide accurately and honestly all of the information necessary to prepare and file the Chapter 7 bankruptcy case, and other motions or proceedings arising during the course of the case.
- (d) To timely respond to all letters, emails and telephone calls from the Attorney or any member of his staff.
- (e) To keep the Attorney advised at all times of the Debtor's mailing and physical addresses, telephone numbers, and email addresses.
- (f) To appear at the first meeting of creditors (the 341 meeting) and at any other court hearings or meetings as may be required by the Court or any other party.
- (g) To keep all scheduled office appointments with the Attorney and to notify the Attorney in advance of any problems with the timing and scheduling or rescheduling of such appointments.
- (h) To contact the attorney by Telephone with the understanding that the Attorney is only able to return calls between the hours of 8:00 a.m. to 9:30 a.m. and 4:00 p.m. to 6:00 p.m. If the Attorney is available when the call is actually received, then the call will be taken at that time. However, if you have to leave a message for the Attorney then you must provide a number that you can be reached at during the designated times. The Attorney or Legal Assistant will make every effort to return all such telephone calls within 48 hours, excluding weekends and holidays.

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- (i) To provide any information requested of the Debtor by the Chapter 7
 Trustee, the Bankruptcy Administrator, or any other party in the case, unless the Court rules that the Debtor is not required to provide such information.
- (j) To respond as soon as possible to any requests for the Debtor by the Attorney or his Legal Assistant.
- (k) To comply with the obligations imposed upon the Debtor by the Local Rules of the Bankruptcy Court for the Northern District of Illinois.
- (I) To sign a tax authorization form to authorize the Attorney to get copies of income tax returns from the respective taxing agencies for a period of four (4) years prior to the filing of your bankruptcy case.
- (m) To provide current bank account information to include monthly statements as requested and online account balances as of the date of the signing of your bankruptcy petition packet.

11. Attorney Withdrawal from Chapter 7 case, Adversary Proceeding or Contested Matter.

Pursuant to the Local Rules of the Bankruptcy Court, the Attorney shall remain the responsible attorney of record for the Debtor in all matters in the case until the case is closed, dismissed or the discharge is entered or until the Attorney is relieved from such representation by order of the Court. The parties agree that just reasons for the Attorney to withdraw from the representation of the Debtor, include but are not limited to the following:

- (a) The failure of the Debtor to provide complete, truthful and accurate information to the Attorney.
- (b) The failure of the Debtor to comply with the Debtor's obligations as provided for in this Agreement and in the Local Rules.
- (c) The failure of the Debtor to comply with any of the obligations imposed on the Debtor by the Bankruptcy Code and the Bankruptcy Rules.
- (d) The failure or refusal of the Debtor to comply with the Debtor's obligations to provide any supplemental information to the Court or to the Chapter 7

 Trustee or to correct any incorrect or incomplete information previously provided to the Court or the Trustee.
- (d) The failure of the Debtor to provide complete, truthful and accurate information to the Court, the Chapter 7 Trustee and the Bankruptcy Administrator.
- (e) The failure of the Debtor to pay for all Non-Base fee services.
- (f) If the Debtor are husband and wife, then any separation, serious domestic dispute, or divorce of the parties.

(g) Any irreconcilable conflict between the Attorney and the Debtor with respect to the case.

Dated: 7/22/16	By: MMMM BACH LAW OFFICES
Dated: 7/22/16	Debtor: January 19
Dated:	Debtor:

United States Bankruptcy CourtNorthern District of Illinois

		Not then District of Infinits		
In re	Todd Hardy		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR I	MATRIX	
		Number o	of Creditors:	34
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of cred	litors is true and	correct to the best of my
Date:	July 27, 2016	/s/ Todd Hardy Todd Hardy Signature of Debtor		

Alexian Bros Medical Center Lock Box 22589 22589 Network Place Chicago, IL 60673

Americash Loans, LLC 205 Army Trail Rd Glendale Heights, IL 60139

Animal Medical Center of Itasca 220 Catalpa Street Itasca, IL 60143

Arlington Ridge Pathology 520 E. 22nd Street Lombard, IL 60148

AT&T Legal Services PO Box 968008 Schaumburg, IL 60196

Beneifical Illinois Inc. et al C/O CT Corporation 208 S. LaSalle Street Chicago, IL 60604

Board of Managers Linden Woods Cond 1870 Tall Oaks Sr Aurora, IL 60505

Calvary SPV I, LLC 500 Summit Lake Drive, #400 Valhalla, NY 10595

CepAmerica Illinois c/o SCCS 914 14th Stret PO Box 480 Modesto, CA 95353

Comcast C/O Credit Management P.O. Box 118288 Carrollton, TX 75011-8288 Dental Vue 1443 Lee Street Des Plaines, IL 60016

DuPage Medical Group 15921 Collections Dr Chicago, IL 60693

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Harris & Haris Ltd 111 W. Jackson Blvd Suite 400 Chicago, IL 60604

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